POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	ʃml		1/3/⊌
O.I.P.E. CLASSIFIER		7	01 13·00
FORMALITY REVIEW	Q	111690	2/3
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✔	.... Rejected	N	.... Non-elected
=	.... Allowed	I	.... Interference
—	(Through numeral)... Canceled	A	.... Appeal
÷	.... Restricted	O	.... Objected

Claim		Date										Claim		Date									Claim		Date								
Final	Original	5/2/02	10/18/02	3/7/03	8/8/03	3 22 04						Final	Original										Final	Original									
①	✓	✓	✓	✓							51											101										
2	✓	✓	✓	✓	✓						52											102										
3	✓	✓	✓	✓	O						53											103										
4	✓	✓	✓	✓							54											104										
5	✓	✓	✓	✓							55											105										
6	✓	✓	✓	✓							56											106										
7	✓	✓	✓	✓							57											107										
8	✓	✓	✓	✓	O						58											108										
⑨	✓	✓	✓	✓	=						59											109										
10	✓	✓	✓	✓							60											110										
11	✓	✓	✓	✓							61											111										
12	✓	✓	✓	✓							62											112										
13	✓	✓	✓	✓							63											113										
14	✓	✓	✓	✓							64											114										
15	✓	✓	✓	✓							65											115										
16	✓	✓	✓	✓	=						66											116										
17		✓	✓	✓	O						67											117										
18		✓	✓	✓	=						68											118										
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50											100											150										

If more than 150 claims or 10 actions
staple additional sheet here

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